PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

19664724

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									766	U	16	4
_		CLAIMS A	S FILED - (Column		(Column 2)			SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			101				R/	\TE	FEE	7	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		BAS	C FEE	375.00	OR	BASIC FEE	750.00
TO	TAL CHARGE	ABLE CLAIMS	√		* 81		X	9=		OR	X\$18=	1458
INDEPENDENT CLAIMS			2 Ciminus 3 =		* 21		X	12=		1	X84=	
Μl	JLTIPLE DEPEN	NDENT CLAIM P	RESENT						<u> </u>	OR		1764
* If the difference in column 1 is less than zero, enter "0" in column 2						column 2	+1	40=		OR	+280=	1
						TO	TAL		OR	TOTAL	53972	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							SM	SMALL ENTITY			OTHER SMALL	
Г	E-participation of	CLAIMS		HIGH						OR	011111111111111111111111111111111111111	
AMENDMENT A		REMAINING AFTER AMENDMENT		NUME PREVIO PAID I	BER	PRESENT EXTRA	R/	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$	9=		OR	X\$18=	
AME	Independent	*	Minus	***		=	X4	2=		OR	X84=	
<u>L_</u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										.000	
								IO= OTAL		OR	+280=	
								FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colum		(Column 3)						
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER USLY	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Q	Total	*	Minus	**		=	X\$	9=		OR	X\$18=	
AM	Independent	*	Minus	LE DEPENDENT CLAI		=	X4	2=		OR	X84=	
L	THOTFILOL	NIATION OF MC	JUITPLE DEP	ENDENT	CLAIM		+14	0=		OR	+280=	-
								OTAL FEE		OR ,	TOTAL ADDIT. FEE	
		70011			,	ADDII. FEE						
AMENDMENT C		CLAIMS		HIGHE	i	(Column 3)			4001			
		REMAINING AFTER AMENDMENT		PAID F	USLY	PRESENT EXTRA	RA	ΓE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$	9=		OR	X\$18=	
	Independent	*	Minus	***		=	X4:	2=		ŀ	X84=	
	FIRST PRESE	NIATION OF MU	ILTIPLE DEPENDENT		CLAIM		X.12=			OR	7,042	
* 1	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+280=	
***	f the "Highest Nur If the "Highest Nui	mber Previously Pa mber Previously Pa ber Previously Paid	id For" IN THIS aid For" IN THIS	SPACE is SPACE is	less that	1 20, enter "20."	ADDIT.	_			TOTAL ADDIT. FEE umn 1.	